



WARWICKSHIRE COUNTY COUNCIL.

EDUCATION COMMITTEE.

REPORT OF SCHOOL MEDICAL OFFICER.

May 2nd, 1921.

TO THE EDUCATION COMMITTEE,
WARWICKSHIRE COUNTY COUNCIL.

MR. CHAIRMAN, LADIES AND GENTLEMEN,

1. I beg to present my Report for the year ended 31st December, 1920, on the work of the School Medical Service carried out in the Administrative County of Warwick under the Education (Administrative Provisions) Act, 1907, and the Education Act, 1918.

2. The year under review has seen the development, and to a large extent the completion, of schemes for the treatment of school children formulated during the previous year, such being the natural corollary of medical inspection, and I am confident that however heavy the expenditure may have been in connection with these activities, results, even in this short time, shew that the measures taken in this respect have been fully justified.

MEDICAL STAFF.

3.	County Medical Officer of Health and School Medical Officer	Dr. A. Hamilton Wood.
		„ H. C. Bracey.
		„ L. L. Fyfe.
	Assistant County Medical Officers	„ Lloyd Roberts.
		„ W. H. Sutcliffe.
		„ Katherine Scott.
	Dental Surgeon	Mr. B. M. Martin.
		Dr. T. Harrison Butler.
	Ophthalmic Surgeons (part-time)	„ W. H. Brazil.
		„ R. F. Jones.

4. The Assistant Medical Staff remained numerically the same as in the previous year. Dr. W. H. Sutcliffe (Capt., R.A.M.C.) was appointed in July in place of Dr. A. H. Wilson (Capt., R.A.M.C.), resigned, and Dr. Katherine Scott in December in place of Dr. Dorothea Tudor, resigned.

SCHOOL NURSING STAFF.

5. The full staff of seventeen Health Visitors, who act also as School Nurses, together with Miss Lowe as Superintendent, was maintained throughout the greater part of the year. The employment of whole-time Health Visitors, who devote approximately one-third of their time to the work of the School Medical Service, is a policy to be highly commended in a County such as Warwickshire, where there are extremely few districts so sparsely populated as to make Health Visiting from a local centre an impracticable financial proposition.

6. The services of the Health Visitors as School Nurses are utilized in the Schools during Medical Inspection, where these officers are of the greatest assistance to the Medical Staff in making a preliminary inspection of the children in respect of cleanliness of person and clothing, and in discussing with the parents details of treatment after the medical examination has been made. Their presence during Medical Inspection also allays the fears of the younger children and imparts confidence to the girls.

7. They are furthermore in a position to decide when their first home visit should be paid in connection with any defect discovered, and can usually give information as to the home conditions which is of the greatest value to the Medical Officer, who sees the child only as a scholar or unit of school attendance and not as a member of a particular family. It is accordingly of the utmost importance that the School Nurse should be present on every occasion when a Medical Inspection is held.

8. It has been said by some that the presence of the School Nurse at Medical Inspection can well be dispensed with, that her place can be filled by a School Teacher, and that the time so spent by the School Nurse can be put to better purpose in other ways, but my experience in Warwickshire is that the presence of the School Nurse during Medical Inspection is "indispensable," and should undoubtedly be continued and encouraged.

CO-ORDINATION.

9. There are 25 Voluntary Infant Welfare Centres in the Administrative Education area of the County, all worked in close co-operation with the County Health Department and on uniform lines. Schedules have been introduced during the year for recording the medical examination of children in attendance at the Centres between the ages of one and five years, these being in due course forwarded to the Infant Schools for reference by the Medical Officers at the first School Medical Inspection.

10. Debilitated children in attendance at the Centres are thus kept under constant observation, and early defects remedied as far as possible before commencing their school life. The Health Visitors during their visits to the homes under the Notification of Births Act, come into touch with many children under school age and advise the parents to seek medical advice where such is deemed by them desirable. No scheme has yet been undertaken for the treatment by the Education Committee of children under school age.

THE SCHOOL MEDICAL SERVICE IN RELATION TO ELEMENTARY SCHOOLS. SCHOOL HYGIENE.

11. In the Administrative County there are 319 Schools and Departments having a school population of approximately 37,000.

12. During the year under review overcrowding was noticeable in a number of Schools throughout the County, and as a result the provision of a new Infant School at Two Gates, Wilnecote, was undertaken, and extensions by means of Army Huts have been provided at Atherstone, Balsall Street and Minworth.

13. Sites have been secured for new schools, or extensions to existing premises, ^{have been provided,} at Alcester, Arley, Kenilworth, Polesworth, Baddesley Ensor, Rugby, Long Compton, Hockley Heath, Bulkington, Balsall Street (Army Hut), Minworth (Army Hut),

14. It is gratifying to note that structural improvements have been carried out in a number of schools, in connection chiefly with ventilation and heating, and some insanitary offices have also been attended to. Among the schools at which such improvements have been effected may be mentioned Atherstone Junior Mixed, Stratford Council, Henley-in-Arden, Claverdon, Warmington, Glascote Girls, Hartshill South, Harbury, Offchurch, Hatton, and Kettlebrook. Much remains still to be done in this connection, but it must always be borne in mind that the ideal cannot be attained without considerable expenditure, consequently attention has been drawn only to insanitary conditions regarded as urgent, and likely, if continued, to have a detrimental effect upon the health of the scholars.

15. In a number of instances Playgrounds have been repaired and new Playing Fields have been provided at Binley, Stratford Council Central, Wellesbourne Central, Ansley Council, Long Lawford, Hockley Heath and Salter Street. No school should be regarded as complete without a good and well-situated Playing Field, where organised games, both for boys and for girls, can be indulged in under the supervision and guidance of properly Trained Teachers.

16. It is true that active intelligence in the developing child is to a large degree dependent upon physical fitness, and no local authority providing education for its children should ever lose sight of this fact.

17. The value of the Playing Field is two-fold, it not only stimulates the physical and mental development of the child, but also influences the formation of character, and for this reason its provision should be encouraged and supported, being recognised as an all important factor in modern Elementary Education.

EXTENT AND SCOPE OF MEDICAL INSPECTION AS CARRIED OUT IN 1920.

18. (a) Routine Medical Inspection of Entrants, of children of the Intermediate Age group and of Leavers, has been continued as formerly. Of these three divisions there have been examined :—Entrants, 4,158 ; Intermediate Group, 2,988 ; and Leavers, 4,674. In addition, 1,553 Specials have been examined at Medical Inspection, 2,525 at School Clinics, and 2,011 children found defective at previous inspections have been re-examined, making a total of 17,909 examinations during the year. Special visits at the request of School Attendance Officers, Teachers or Parents have been paid to 1,066 children, with a view to deciding as to their fitness or otherwise to attend School.

19. The Medical Inspection of 1,365 Secondary School children has also been undertaken during the year. Of these, 1,091 girls were examined by Dr. Dorothea Tudor and 274 boys by Dr. Bracey and Dr. Roberts, details of which will be found in the Appendix.

20. (b) The requirements of the Board as contained in their Schedule of Medical Inspection has been carried out in full.

21. (c) Information with regard to early crippling defects is obtained principally through Head Teachers and School Attendance Officers. Special visits of inspection are paid immediately to any such cases if need be at the children's own homes, and advice given with a view to early treatment and the prevention of serious and permanent crippling.

22. There is close co-operation between the School Medical Service and the Tuberculosis Officer, any cases of a probable Tuberculous nature being referred to him for diagnosis and treatment.

23. (d) In no instance has Medical Inspection had to be undertaken outside the school premises, and school closure has been necessitated only at 10 small schools.

FINDINGS OF MEDICAL INSPECTION.

24. Of 11,820 children examined at Medical Inspection, excluding "Specials," 2,484, or 21 per cent., were referred for treatment. If Specials are included the number of children examined amounts to 15,898, with 5,338 referred for treatment, or 33 per cent. In other words 2 out of every 9 children examined among Entrants, Intermediates and Leavers suffered from a defect for which treatment was recommended.

(a) UNCLEANLINESS.

25. Of 15,898 children examined at Medical Inspection, only 546 were found with heads so dirty as to necessitate the sending of a "head card," containing instructions how to cleanse. This comparatively small number is due to the fact that the children are continually surveyed in the Schools by the Health Visitors, who follow up in the homes those children whose heads they find unclean. But for this useful procedure the number of unclean heads discovered during Medical Inspection would be very much greater.

26. Including all children examined at Medical Inspection, 33,677 children have thus been surveyed by the Health Visitors for uncleanliness. Of these, 1,381 were found to be verminous and 3,150 had nits in their hair, a total of 13 per cent. of unclean heads. This disgusting and unhealthy condition can only be improved by constant inspection, by endeavouring to inculcate in the girls themselves an abhorance of the "pediculus capitis," and by resorting to drastic measures with those parents who habitually and without shame neglect their children in matters of cleanliness.

(b) MINOR AILMENTS.

27. 1,777 children suffering from Minor Ailments were referred for treatment or 11.2 per cent. of all children examined.

(c) TONSILS AND ADENOIDS.

28. 1,140 children, or 7.1 per cent. of all children examined were referred for treatment for enlarged Tonsils and Adenoids.

(d) TUBERCULOSIS.

29. Only 30 children, or 0.2 per cent. were found to be suffering from definite Pulmonary Tuberculosis. In addition to this number 58, or 0.36 per cent., were regarded as suspected cases and referred for treatment.

30. Of non-pulmonary forms of Tuberculosis 29, or 0·18 per cent., were referred for treatment. These were mostly glandular affections, only three cases of Hip Tuberculosis being discovered, and four cases of other bone and joint tuberculosis.

(e) SKIN DISEASE.

31. RINGWORM.

During Medical Inspection 194 new cases of Ringworm—127 of head and 67 of body—have been discovered and referred for treatment. This, however, does not represent the total amount of Ringworm in the County. During the year there have been under observation by both the Medical and Health Visiting Staff, 504 cases of Ringworm, 20 per cent. of these being skin infections. This represents an increase of 1·3 per cent. of all children in school attendance. All cases of Scalp Ringworm are verified by microscopical examination carried out in the Office or by the Assistant Medical Officers.

32. SCABIES.

520 cases of Scabies have been discovered and referred for treatment during the year.

33. IMPETIGO.

1,741 cases of Impetigo have been excluded from school and followed up by the Health Visiting Staff, representing an incidence of 4·7 per cent. of all children of school age.

34. Of other skin diseases 273 have been referred for treatment.

(f) EXTERNAL EYE DISEASE.

35. 137 cases of external Eye Disease were referred for treatment, and 112 cases of Squint. Of the latter 74 were discovered at routine Medical Inspection, all cases being referred for treatment.

(g) DEFECTIVE VISION.

36. 681 cases of Defective Vision, excluding Squint, were referred for treatment. Of all children examined this represents a percentage of 4·3, but in order to obtain a truer estimate of the amount of defective vision present among school children, those only should be considered who were examined at routine Medical Inspection, excluding Entrants and Special cases. This represents 600 cases referred for treatment or 7·8 per cent.

(h) EAR DISEASE AND HEARING.

37. 221 cases of Ear Disease were recorded, 1·4 per cent., and 0·7 per cent. were referred for treatment on account of deafness.

RE-EXAMINATIONS OF CHILDREN FOUND DEFECTIVE AT PREVIOUS INSPECTIONS.

38. The following table shews that 2,011 children were re-examined during the year, and with regard to defects referred for treatment, 50·6 per cent. were remedied, 13·4 per cent. improved, and 36 per cent. unchanged. Of the latter the largest number of unremedied defects were Nose and Throat conditions and Defective Vision. This is

accounted for by the fact that facilities for the treatment of these defects were not completed until early in the present year. It is accordingly anticipated that future returns in this respect will shew a marked reduction in the percentage of unremedied defects.

39. The small number of defects of clothing, cleanliness of head and cleanliness of body as shewn in this table is due to the fact that the County Health Visitors deal with such cases in their routine visits to the schools, the results of which are detailed in the Appendix.

TABLE OF RE-EXAMINATIONS.

Condition.						Total.	Remedied.	Improved.	Unchanged.
Clothing	...	...	...	...	...	3	—	3	—
Footgear	...	...	...	...	...	—	—	—	—
Cleanliness of Head	...	...	...	...	...	6	3	3	—
Cleanliness of Body	...	...	...	...	...	12	9	2	
Nutrition	...	...	...	...	...	6	1	4	1
Nose and Throat	...	...	...	...	...	916	380	87	449
External eye disease	...	...	...	...	...	108	66	14	28
Ear disease	...	...	...	...	...	77	41	23	13
Teeth	...	...	...	...	...	11	4	1	6
Heart and circulation	...	...	...	...	...	37	12	17	8
Lungs	...	...	...	...	...	40	25	12	3
Nervous system	...	...	...	...	...	13	7	2	4
Skin	...	...	...	...	...	48	45	3	—
Rickets	...	...	...	...	...	3	1	2	—
Deformities	...	...	...	...	...	19	7	7	5
Tuberculosis—non-pulmonary	...	...	...	...	...	13	3	7	3
Speech	...	...	...	...	...	—	—	—	—
Mental condition	...	...	...	...	...	4	—	2	2
Vision and squint	...	...	...	...	...	550	340	51	159
Hearing	...	...	...	...	...	4	1	2	1
Miscellaneous	...	...	...	...	...	141	74	29	38
Total						2011	1019	271	721

INFECTIOUS DISEASE.

40. All cases of a suspected infectious nature are excluded from school by the Head Teachers and notifications as to the nature of the disease are immediately forwarded to the School Medical Officer and to the District Medical Officer of Health. This allows of close co-operation between the Local Sanitary Authority and the School Medical Authority in deciding as to closure of schools or exclusion of individual scholars on account of infectious disease. Co-operation in this respect has been more complete than in previous years.

41. Measles has again been prevalent throughout the County, especially during the early part of the year. This marked the decline of an epidemic which commenced during the latter months of the previous year. Measles necessitated the closure of 47 Departments, Whooping Cough 15, Chicken-pox 6, Influenza 4, Diphtheria 4, Mumps 3, and Scarlet Fever 3, a total of 82 Departments closed for varying periods on account of Infectious Disease.

FOLLOWING UP.

42. The following up of defects by the Health Visiting Staff has always been a special feature of the School Medical Service in Warwickshire. Long before facilities for treatment were provided by the Education Committee pioneer work was accomplished by the School Nurses in inducing parents to obtain the required treatment for their children through repeated visits to the homes, using persuasion as their principal weapon. The same methods are still employed, but are materially strengthened by the provision now of facilities for treatment of at least the prevailing defects discovered during Medical Inspection.

43. I have already referred to the value of the presence of the School Nurse at Medical Inspection, and to the help she is in a position to offer to the Medical Officer through her knowledge of the home conditions and environment of the children in her district. Every defect referred for treatment is recorded by her and is followed in almost every instance by a visit to the home. The need for treatment is emphasised in a convincing manner, and facilities offered by the Education Committee are explained to the parents in detail. This procedure goes a long way towards expediting treatment, and is admittedly a factor of the utmost importance in any treatment scheme provided by a Local Authority.

44. During the year under review, 9,643 visits have been paid to the homes of school children found defective at Medical Inspection, an average of 567 visits for each Health Visitor.

45. 4,210 new cases were reported to the Health Visitors for "following up," and 600 cases were carried over from the previous year. In addition to these, 7,076 defects, including unclean heads reported by Head Teachers and discovered by themselves during their visits to the Schools, were under their observation during the year. Of this total of 11,886 cases, 10,933 were attended to either by receiving treatment under the Local Authority's Schemes, through Medical Practitioners, or by the parents in cases of uncleanliness and minor skin troubles on the advice of the Health Visitors.

46. This is a record achievement, being an advance of over 3,000 cases on the previous year. It must be remembered, however, that the staff during the year was at its full strength of 17 as compared with 14 during 1919.

47. It gives me the greatest pleasure to place on record so successful a year's work as was accomplished by the Health Visiting Staff during 1920. Reference to the Tabular Statement of their work attached to this Report shews how comprehensive this is and how intricate are the records required to be kept by each Health Visitor. In this respect they are, however, fortunate in having the help and guidance of so enthusiastic a Superintendent as Miss Lowe, who is responsible for the compilation of the appended Tabular Statement.

MEDICAL TREATMENT.

48. Everyone fully appreciates the fact that "prevention is better than cure," but the carrying out of treatment of defects discovered in school children is after all a preventive measure against subsequent disease or disability of later years. It may be that in years to come the extended education of the mother and the pre-mother in matters of child welfare may make for so healthy a stock that defects, as we see them to-day in school children, will be practically a negligible quantity, but that happy state is hardly yet in sight. Unfortunately there is at present much material among school children, both for the surgeon and the physician, and it is gratifying to note that facilities for the treatment of Warwickshire children are now being provided by the Education Committee on a comprehensive scale and in a manner that is bound to yield excellent results in the future.

(a) MINOR AILMENTS CLINICS.

49. There are now 7 Minor Ailments Clinics established in the County, at Warwick, Kenilworth, Rugby, Stratford-on-Avon, Atherstone, Bedworth and Polesworth. The last-named was the only new one provided during the year, the date of opening being Nov. 11th.

50. The work carried out at these various Clinics may be summarised briefly as follows :—

Warwick	327 children treated, making 1169 attendances.
Kenilworth	341 „ „ „ 723 „
Rugby	654 „ „ „ 1057 „
Stratford-on-Avon ...	175 „ „ „ 305 „
Atherstone	427 „ „ „ 1021 „
Bedworth	570 „ „ „ 1614 „
Polesworth	31 „ „ „ 56 „
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Total	2525 „ „ „ 5945 „
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51. Particulars of these Clinics were given in my Annual Report for 1919, the only alterations being that the Warwick Clinic is now under the supervision of Dr. W. H. Sutcliffe, the Kenilworth Clinic was transferred from the Wesleyan Schoolrooms, Priory Road, to more suitable accommodation at the Parochial Hall, High Street, and is also now under the supervision of Dr. W. H. Sutcliffe. The new Clinic at Polesworth is held on Thursdays at the Polesworth Central School and is under the supervision of Dr. H. C. Bracey.

(b) TONSILS AND ADENOIDS.

52. Arrangements for the operative treatment of Enlarged Tonsils and Adenoids under the Education Committee's Scheme have been extended during the year to include facilities at the Coventry and Warwickshire Hospital, Coventry, and at the Nuneaton Borough School Clinic. Negotiations with the Warneford Hospital, Leamington, were re-opened early in the present year, resulting in an arrangement whereby County children recommended by the School Medical Officer will be operated on at a cost of one guinea per case, this charge to include in-patient treatment when considered necessary.

53. The provision for the operative treatment of these diseases under the Education Committee's Scheme is now wonderfully complete over the whole of the County, including as it does arrangements with the General Hospital, Tamworth, St. Gerard's Hospital, Coleshill, Coventry and Warwickshire Hospital, Coventry, Hospital of St. Cross, Rugby, General Hospital, Stratford-on-Avon, Warneford General Hospital, Leamington, and the School Clinic, Borough of Nuneaton.

54. The advantages of Hospital treatment over treatment at School Clinics in a County area is obvious. Beds are available for cases requiring in-patient treatment, skilled nursing is at hand, a competent anæsthetist is attached to the Hospital, and any emergency arising during operative treatment can be more aptly dealt with in Hospital than on School Clinic premises, unless the Clinic is fully equipped and constitutes in itself a miniature Hospital, when it at once becomes a serious item from the point of view of maintenance.

55. Of 1,140 cases of Enlarged Tonsils and Adenoids referred for treatment, 702 received operative treatment, and in 254 cases operation, on the advice of the family doctor, was not recommended.

56. Of the 702 cases operated on, 480 were dealt with under the Education Committee's Scheme, and 222 received treatment privately or by Hospital ticket, mostly at one or other of the Birmingham Hospitals.

57. The cases treated under the County Scheme—480 as compared with 181 during the previous year—are indicated below :—

Tamworth Hospital	...	...	...	...	...	...	181
Stratford-on-Avon Hospital	...	...	...	...	...	...	84
St. Gerard's Hospital, Coleshill	...	...	...	...	...	...	55
Coventry and Warwickshire Hospital	...	...	...	...	...	...	45
Rugby Hospital	...	...	...	...	...	...	22
Nuneaton School Clinic	...	...	...	...	...	...	45
Practitioners	...	...	...	...	...	...	48
Total							480

(c) TUBERCULOSIS.

58. Thirty cases of definite Pulmonary Tuberculosis and 58 suspected cases were referred for treatment, and all received some form of treatment either through the Tuberculosis Officer or through their own family doctors. Forty-two children were admitted during the year to Sanatoria ; 39 to Exhall and 3 to Bramcote.

59. At Exhall Sanatorium, provided by the Warwickshire and Coventry Joint Committee for Tuberculosis for women, and for children under 12 years of age, facilities are now provided for the education of the children admitted. The salutary effect of " School " upon the little patients is very obvious, making their stay in the Sanatorium brighter and more interesting. It is of the greatest importance, however, that the curriculum should be carefully studied and that full consideration should be given to the particular needs and capabilities of children suffering from this disease in its various stages.

60. Ten cases of bone and joint Tuberculosis referred for treatment were dealt with at the various Hospitals and Sanatoria recognised for the purpose. Treatment in all such cases is provided by the Joint Committee for Tuberculosis on the advice of Dr. McGeagh Williams, the Tuberculosis Officer.

(d) SKIN DISEASE.

61. 520 cases of Scabies were excluded from School during the year. All received treatment either at School Clinics or at home and were eventually re-admitted although in many instances treatment was protracted through parents failing to carry out the energetic and detailed measures necessary to effect a speedy cure.

62. X-RAY TREATMENT OF RINGWORM was continued as formerly at four centres, Coventry School Clinic, Warneford Hospital, Leamington, Birmingham School Clinic and at Rugby. The operator both at Coventry and Leamington is Dr. T. E. C. Cole ; at Birmingham, Dr. Russell Green ; and at Rugby, Dr. Saxby.

63. During the year 46 cases were dealt with, all with satisfactory result. It was hoped that further facilities for X-ray treatment would have been provided at Stratford-on-Avon and in the Tamworth district, but unfortunately these have not yet materialised.

(e) DEFECTIVE VISION.

64. 793 cases of Defective Vision were referred for treatment, and of these 507 were refracted under the Education Committee's Scheme, as compared with 199 during the previous year. 105 remained untreated at the end of the year.

65. Arrangements for refraction were continued as hitherto with the Stratford-on-Avon Hospital, where 87 cases were treated, and with the Coventry Education Authority, where at the Coventry School Clinic 159 cases were refracted. Dr. Bracey, Senior Assistant County Medical Officer, continued this work principally in the Northern Division of the County, where he dealt with 166 cases, and Dr. Jones of Tamworth with 95 cases. Dr. Bracey in his Report, which is appended, makes some interesting references to his work in this connection.

66. Early in the present year the WARWICK EYE CLINIC at the County Health Centre was opened. This Clinic, supervised by Dr. Harrison Butler, is intended to serve Warwick Borough and the rural districts in the neighbourhood.

67. At all Clinics spectacles are purchased, ordinarily by the parents, and only in necessitous cases are they provided by the Education Committee. Assistance is also given to necessitous cases in respect of railway fares to Hospitals or Clinics. During 1920 the cost of such assistance amounted to £8 17s. 3d.

68. When arrangements for a Refraction Clinic at Rugby are completed, facilities for the treatment of Defective Vision will then be fairly generally provided over the whole of the County.

(f) EAR DISEASE AND HEARING.

69. 164 cases of Ear Disease and Deafness were referred for treatment, and of these 119 received treatment; 75 of the cases were dealt with at the Minor Ailments Clinics, where constant attention in many cases had a beneficial effect. 45 cases remote from School Clinics received unsatisfactory treatment or no treatment at all.

(g) DENTAL DEFECTS.

70. The year under review is the first complete year during which Dental Treatment has been carried out under the Education Committee's Scheme. The introduction of School Dentistry, long delayed no doubt on account of the war, was undertaken more or less as an experiment, by the appointment at first of one whole-time Dental Surgeon, although it was fully realised, when my scheme was first submitted, that one Dentist could only touch the fringe of the work that would have to be dealt with annually in a County such as Warwickshire.

71. The Dentist, with motor car provided by the Education Committee, and with portable equipment, inspected and treated the 6 to 8 year group of children in all the Elementary Schools of Warwick, Rugby, Bedworth and Stratford-on-Avon; a total of 2,263 children inspected. Of these 1,787 were referred for treatment, 1,126 actually treated, and 290 received treatment a second time. Details of treatment appear in Table IV(d) of the Appendix.

72. It is obvious that to undertake the Dental treatment of the 6 to 8 year group of children only, numbering as they do approximately 6,000, at least three whole-

time Dentists should be provided, and even this number will be insufficient if those children who have been treated are to be re-inspected each year and further treatment given to those found to require it.

73. Dental caries is generally admitted to be the cause of much ill-health and suffering among children, and to be the precursor of serious disease in after life. Any scheme, therefore, providing facilities for treatment of Dental defects in children is an active preventive measure, expenditure on which will be repaid by the healthier life that is bound to result from such treatment.

74. Mr. B. M. Martin, Dental Surgeon, reporting on his first year's work says :—

“ There was a good response on the part of the parents, particularly at Rugby. Children of the age group 6-8 were examined ; those above this age were also allowed to apply for treatment.

“ I give in tabular form the results for 1920—Table IV(d).

“ There seems to be a great demand for treatment from the parents whose children are not in the age group 6-8, especially those who are about to leave school. Of course, with the present inadequate dental service, this delays one. Most Counties of the importance of Warwickshire have at least three Dental Surgeons attending to the dental needs of the children.

75. “ I should like to very strongly advise and recommend that the age group be made 5-8 instead of 6-8. This is my opinion after several years' experience in doing dental treatment for the young. The first teeth of the second dentition usually erupt at the age of $5\frac{1}{2}$ years or thereabouts, and at once need looking after. Often at the age of 6 or 7 this very tooth has gone beyond repair and extraction is necessary. This is a most important tooth to save, and to have to extract it is to the dental mind a great misfortune.

“ I should also like strongly to advise the provision of tooth brushes at a nominal cost to the children.

76. “ During my visits to the schools I noticed a great number of irregularities of the teeth, the treatment for which cannot be undertaken by a School Dentist, more especially by a travelling School Dentist. The remedy for this state of affairs is only to be met by sending the child to a local practitioner.

“ It is now recognised that bad or defective teeth are the Alpha and Omega of most, if not all, troubles of health to which we are liable. Too much importance cannot be attached to this, the state of affairs with regard to the teeth of our men during the late war being proof of this and showing how necessary it is that early attention should be paid to the teeth, the oral cavity or mouth being the gateway to almost every conceivable form of disease—pyorrhea, tuberculosis, septic throats, etc., not to mention other ailments to which our ‘vilum corpus’ is liable.

“ I should like to thank the Head Teachers of the schools that I have visited, and the Health Visitors who have helped me in my work, most heartily for their kind co-operation in the somewhat difficult and trying task of attending to the children, and also to thank you for your advice and help.”

(h) CRIPPLING DEFECTS AND ORTHOPÆDICS.

77. There is, unfortunately, at present no organised system for the treatment of crippling defects. Cases discovered at Medical Inspection are referred principally to the large General and Orthopædic Hospitals in Birmingham. Some little help was given by the Education Committee during 1920, towards the supply of suitable apparatus for cripples in order to allow them to at least attend the ordinary Elementary Schools, pending provision being made at some future date for the treatment of cripples at a suitable residential school.

OPEN-AIR EDUCATION.

78. It is generally agreed that in the prevention of Tuberculosis the two principal aims should be (1) the segregation of the highly infectious or advanced type of case and (2) the fortification of the body against infection or at least massed infection by the Tubercle Bacillus. Increasing the resistive power of the body is a method of prevention that can be practised at little expense to the individual, if the need for special measures in this direction is realised. Much, no doubt, can be done for the weakly or pre-tuberculous child while in attendance at an ordinary Elementary School, provided the co-operation of the parent is obtained, together with a full understanding by the parent and the Teacher of what is required—fresh air, proper food, sufficiency of food, graduated physical exercise, sufficient rest, including sleep, and avoidance of mental over-strain.

79. In order, however, to ensure the fulfilment of these requirements, the weakly child should preferably be dealt with at a Residential School of Recovery. Unfortunately the scheme proposed some two years ago for the provision of an Open-Air School of 40 places has not yet materialised, and on account of cost has had to be abandoned for the time being.

80. It is gratifying to note that the majority of the Head Teachers in the County fully realise the value of open-air classes and take advantage of the weather for this purpose by holding play-ground classes as opportunity offers. Much may be gained in the summer months in this manner, but what is gained then may be lost in the winter months through class rooms being inefficiently warmed and ventilated.

PHYSICAL TRAINING.

81. It is customary for the Medical Inspectors to refer to the Head Teachers all children found at Medical Inspection to require special attention in respect of physical training. Modified exercises are recommended in cases of cardiac weakness and in aggravated cases of Heart Disease physical exercises are entirely prohibited. Mouth-breathing children are given leaflets detailing simple corrective exercises to be carried out on rising in the morning and before retiring at night, special attention being directed to them by the Teacher of Physical Exercises in the School.

82. Remedial work for the correction of commencing deformity such as curvature of the spine, round shoulders, flat chest, and flat foot, should properly be undertaken at a Remedial Clinic. No such Clinic has yet been provided in Warwickshire, each case as it is discovered being referred to the child's family doctor for advice and treatment.

83. The following interesting Report has been kindly submitted by Mr. P. R. Marsh, Organiser of Physical Training in the County :—

84. “ Although I have had the honour of serving this Committee in my present capacity since August, 1919, I regret that I have not yet been able to visit all the schools

in the County. During the past year, however, I have been able to conduct classes for teachers and visit schools in five new 'class areas,' in addition to paying visits to schools previously dealt with.

Classes for Teachers.

85. "During the past year courses of instruction were held at Foleshill, Bedworth, Solihull, Atherstone and Wilnecote, at which centres teachers from neighbouring schools attended. Whereas former courses have consisted of 12 lessons of 2 hours duration, those at present organised consist of 14 lessons of 1½ hours duration, as it was felt that in cases of teachers travelling some distance to a class, the two hour lesson was too long.

86. "These courses are not considered to be all that is necessary for the training of teachers in Physical Exercises, but are intended as preliminary courses to arouse enthusiasm, and enable teachers to appreciate and interpret the general spirit as suggested in the syllabus recently issued by the Board of Education.

87. "That success has been obtained may be judged from the facts that in spite of sickness, etc., the attendance of teachers has been well maintained throughout; teachers who have attended have asked that further classes may be organised; whilst their work in the schools has shewn signs of steady and willing efforts towards improvement.

Work in Schools.

88. "During the time that I have been holding a class in a 'class area,' I have visited the schools of that area as frequently as possible, giving demonstration lessons and assisting teachers in putting into practice the principles taught at the teachers' class.

89. "The Board's Syllabus now forms the basis of instruction in the schools, and has met with unanimous approval. The educational effect of the present scheme has been most marked, and teachers have frequently observed that the beneficial effect of the Physical Training lessons is apparent in the work of the school as a whole. It is now generally appreciated that a correct system of physical education should form the basis of the general educational system of the school.

Time given to Physical Education.

90. "Previous to my appointment as Organiser, the majority of the schools devoted two half-hour lessons to 'drill.' Feeling that under such arrangements progress was not possible, the Committee have now required that each class shall receive a daily lesson of 20 minutes, a decision with which Head Teachers have willingly concurred. Where one lesson has been lengthened for Organised Games, however, three additional 20 minute lessons only are given.

Organised Games.

91. "Every encouragement has been given to teachers desiring that Organised Games shall be given in addition to Physical Exercises. The Committee have made provision for playing fields and games apparatus.

92. "Some 100 schools have now facilities for taking Organised Games on fields, open spaces or large playgrounds.

93. "The provision of apparatus is at present a costly consideration, and although the Committee have provided footballs, cricket sets, hockey sticks, etc., teachers are encouraged to continue to assist by raising funds locally and by making use of improvised apparatus where possible. Much useful co-operation has been given by teachers in charge of handwork centres, in making basket ball, stool ball, and rounder apparatus.

94. "Although the initial outlay for the establishment of Organised Games in schools has been somewhat heavy, I feel sure that the results obtained will prove of the greatest value to not only the school, but to the community at large. The physical development obtained through games is already appreciated, and every effort is being made to encourage teachers to appreciate their positive educational influence, especially with reference to the training of character. To this end the Committee have issued to teachers my brief notes on the Teaching of Organised Games.

Swimming.

95. "Opportunities for teaching swimming are, unfortunately, somewhat limited. A closed bath exists in Rugby, and open-air ones at Kenilworth, Stratford-on-Avon and Warwick. During 1920, 34 classes from 17 schools attended at these baths, and 13,692 attendances were made.

96. "The methods of instruction, however, left much to be desired, and it is hoped that during the coming season the lessons will be given on the lines suggested by the Amateur Swimming Association.

97. "In conclusion I desire to express my appreciation of the loyal co-operation given by the teachers throughout the County in the efforts which are being made to improve the general standard of work, and of the support I have received in my difficult task from the Director of Education for the County."

PROVISION OF MEALS.

98. During the year under review the sum of £500 was provided in the Estimates for the provision of meals for necessitous school children, but at no time did the need arise for the Education Committee to make such provision independently. Advantage was taken of the facilities provided by the City of Coventry for the supply of free meals to County children residing on the outskirts of Coventry. The provision of the meals was administrated entirely by the Coventry Authorities. Amount expended during the year in this respect, £56.

CO-OPERATION OF PARENTS.

99. The following invitation is sent to the parents in respect of every child submitted for Medical Inspection :—

DEAR SIR OR MADAM,

In accordance with arrangements made for the Medical Inspection of children attending Elementary Schools, it is proposed to examine your child at
a.m.

the above named School on.....day next at

p.m.

You are invited to attend, and any information you may like to give as to the child's health will be welcomed.

Yours faithfully,

100. Consideration is had to the time occupied in attending the School for Medical Inspection, and parents are invited to attend, ten every hour or five every half-hour during each session. The School Nurse always sees to the comfort of the mothers, who in many instances have walked long distances to attend Medical Inspection.

101. During the year 5,280 parents attended out of 13,373 children examined, approximately 40 per cent. This shews that interest in Medical Inspection, from the point of view of the parents, continues, the figure for attendance being a very fair one considering the rural character of the greater part of the County.

CO-OPERATION OF TEACHERS.

102. Medical Inspection is now regarded practically by all Head Teachers as a definite part of their educational organisation. There has consequently been experienced in Warwickshire, almost without exception, the fullest co-operation between the Teachers and the School Medical Staff. The School Nurses are invariably welcomed in the Schools, their work being greatly facilitated by the interest taken by the Teachers in the following up and treatment of defects. Facilities are always given to the School Nurses to give Health Talks to the children when visiting the schools in connection with their following-up work. During the year 358 such Health Talks were given in the Schools.

CO-OPERATION OF SCHOOL ATTENDANCE OFFICERS.

103. Keen interest has been displayed by the School Attendance Department in following up absentees and in referring many of them to the School Medical Staff for examination and report. 601 children have thus been referred during the year. While such visits may have no doubt benefited school attendance very materially, it must be remembered that they have added considerably to the work of the Assistant Medical Officers.

104. There is the closest possible co-operation with the School Attendance Officers in the work of following up defects. All cases in which the Health Visitors fail to obtain treatment by persuasive methods are referred to the School Attendance Officers with a view to their bringing pressure to bear on parents who prove to be recalcitrant; 89 such cases were dealt with during the year. The threat of prosecution invariably suffices to effect the required treatment, but in 12 cases proceedings were taken against parents under Section 12 of the Children Act, one case under the Attendance Bye-laws, and 3 were referred to the N.S.P.C.C. This Society also co-operates fully with both the Medical and School Attendance Departments and has done yeoman service in cases of gross parental neglect.

BLIND, DEAF, DEFECTIVE AND EPILEPTIC CHILDREN.

(a) BLIND.

105. At the present time 15 Blind and Partially Blind children are being maintained in Institutions for the Blind, only one case being admitted during the year.

(b) DEAF AND DUMB.

106. Eighteen Deaf and Dumb children are at present maintained in Institutions, this figure being the same as that of last year. Only two cases were admitted during the year.

(c) MENTALLY DEFECTIVE.

107. In my report for the year 1919 I referred to the completing of certification of 268 cases referred by Teachers, School Attendance Officers and others as probably being Mentally Defective. Of these 21 were certified as Imbeciles or Idiots, 167 Feeble-Minded, 24 Epileptic, and 56 were regarded as Dull and Backward, but not feeble-minded.

108. Thirty-five new cases referred by Teachers have been examined and are classified as follows :—

Imbeciles or Idiots.	Feeble-minded.	Not Certifiable.
4	29	2

During the year 7 cases have been notified to the Local (Control) Authority as being ineducable, two of these being low-grade feeble-minded children and one reported on the previous year.

109. Great difficulty was experienced in finding places in existing Residential Schools for Educable Feeble-minded children, in fact it was found impossible to send any such cases to Residential Schools during the year.

110. During the latter part of 1920 negotiations were entered into for acquiring the use of the Wesleyan School Room, Cambridge Street, Rugby, for the purposes of a Special Day School for Feeble-minded Children. By the end of the year arrangements were completed and the School was duly opened on Jan. 11th of this year, with 17 pupils in attendance (now 19). Mrs. Welch, the Head Teacher, who is keenly interested in this special branch of Teaching, is shewing already what can be achieved in training and educating the feeble-minded, with a view to their contributing at least something towards their support in adult life.

111. All Feeble-minded children who are excluded from school, and for whom admission to a Residential School has been found impossible, are referred to the Association for the Care of the Feeble-minded. Miss Walford, Secretary of the Warwickshire Branch, is of the greatest assistance to me in keeping in touch with these children through her District Care Committees, and in bringing to my notice low-grade cases which she thinks might well be notified to the Local Authority. All cases requiring supervision are accordingly kept under observation very largely through the activities of this Voluntary Association.

NURSERY SCHOOLS.

112. No Nursery Schools have been provided in the County as the need for such does not appear to have arisen.

MEDICAL INSPECTION IN SECONDARY SCHOOLS.

113. Although the Medical Inspection of Provided Secondary Schools did not become compulsory until April 1st, 1920, work in this connection was commenced in Warwickshire in November, 1919.

SCHOOL HYGIENE.

114. Speaking generally, the sanitation of the Secondary Schools is satisfactory. Three Schools, however, have for premises adapted dwelling houses, and, naturally, requisite space and ventilation are not obtainable. These buildings are, it is hoped, only temporary.

SCOPE OF MEDICAL INSPECTION.

115. During the year under review Medical Inspection has been carried out at the following Secondary Schools :—

PROVIDED.	VOLUNTARY.
Alcester Grammar School.	Atherstone Grammar School.
Nuneaton High School for Girls.	Coleshill Grammar School.
Rugby Arnold School.	Warwick King's High School for Girls.

116. Arrangements for Medical Inspection have been made on lines similar to those laid down for Elementary Schools, with the exception that it has not been regarded essential for a School Nurse to be present at the examination, the Head Teachers preferring to act themselves in this capacity.

117. The code groups were adhered to as directed in the Regulations, all newly admitted children being medically inspected, together with those of 12 years of age and over. Of these, there were 1,341 examined and 24 "Specials," total 1,365.

FINDINGS OF MEDICAL INSPECTION.

(a) UNCLEANLINESS.

118. The children were on the whole exceptionally clean, only 8 cases being notified on account of dirty heads and 2 for unclean bodies.

(b) TONSILS AND ADENOIDS.

119. Twenty-six cases of Enlarged Tonsils and Adenoids were referred for treatment, only 1·9 per cent.

(c) VISION.

120. Sixty-eight cases of Defective Vision were referred for treatment, and no cases of squint were discovered.

(d) EAR DISEASE AND HEARING.

121. In three children only was hearing sufficiently defective to require treatment. There were no cases of otitis media recorded.

(e) DENTAL DEFECT.

122. Ninety-four cases of dental defect were referred for treatment.

(f) CRIPPLING DEFECTS.

123. Eighteen children were referred for treatment on account of the following deformities :—Scoliosis 8, Lordosis 7, and Shortening of Leg 3.

FOLLOWING UP.

124. Two inspections have been made at each school during the year, one for routine cases and the other about six months later for re-inspection of defects. Home visiting, as in the Elementary Schools, has not been undertaken, as it was regarded possible that the Head Teachers would be able to influence the parents sufficiently to ensure defects being remedied. Cases found on re-inspection to be still untreated are again notified, special stress being laid on the importance of obtaining the required treatment without delay.

MEDICAL TREATMENT.

125. Facilities for treatment such as obtain in connection with Elementary Schools have not been extended to Secondary School children. All defects discovered at Medical Inspection are referred to the parents, who are advised to obtain treatment from their family doctor or from a specialist if necessary. Only to necessitous Scholarship pupils are the facilities for treatment extended as provided for Elementary School Children. Experience will shew whether this method is likely to be at all satisfactory. During this first year at least the results of treatment leave much to be desired.

RE-EXAMINATIONS.

126. From the following table of re-examinations it is shewn that of 204 defects only 55 or 27 per cent. have been remedied, 61 improved and 88 or 43 per cent. unchanged. It may be that parents in Secondary Schools have not yet appreciated the importance of the findings of the Medical Inspector and of the need for treatment.

127. One defect, however, has received some attention, and that is Defective Vision. Of 71 cases re-inspected, 49 or 69 per cent. had received treatment at the end of six months from the date of the first notice.

128. It is gratifying to notice an entire absence of Pulmonary Tuberculosis either definite or suspected.

TABLE OF RE-EXAMINATIONS.
(SECONDARY SCHOOLS).

Condition.					Results of Treatment.					
					Total.	Remedied.	Improved.	Unchanged.		
Clothing	...	...	...	...	—	...	—	...	—	...
Footgear	...	...	...	...	—	...	—	...	—	...
Cleanliness of head	...	...	...	...	—	...	—	...	—	...
Cleanliness of body	...	...	...	...	—	...	—	...	—	...
Nutrition	...	...	...	...	—	...	—	...	—	...
Nose and Throat	...	...	...	...	43	...	13	...	11	...
External eye disease	...	...	...	...	2	...	1	...	—	...
Ear disease	...	...	...	...	1	...	—	...	1	...
Teeth	...	...	...	...	12	...	1	...	4	...
Heart and circulation	...	...	...	...	4	...	2	...	—	...
Lungs	...	...	...	...	1	...	—	...	1	...
Nervous system	...	...	...	...	3	...	2	...	1	...
Skin	...	...	...	...	3	...	2	...	—	...
Rickets	...	...	...	...	1	...	—	...	—	...
Deformities	...	...	...	...	16	...	1	...	2	...
Tuberculosis—non-pulmonary	...	...	...	...	—	...	—	...	—	...
Speech	...	...	...	...	—	...	—	...	—	...
Mental condition	...	...	...	...	1	...	—	...	—	...
Vision and squint	...	...	...	...	71	...	23	...	26	...
Hearing	...	...	...	...	—	...	—	...	—	...
Miscellaneous	...	...	...	...	46	...	10	...	15	...
Total					204	55	61	88		

PHYSICAL TRAINING.

129. In most cases, very efficient instruction in Swedish Exercises and Gymnastics and supervision of games is carried out,—a fact which is made evident in the good physique and deportment of most of the children. A special point is now being made of Remedial Exercises carried out in School, for the correction of deformities.

CO-OPERATION OF PARENTS.

130. A notice is sent to Parents, requesting their attendance at Medical Inspection, similar to that used for Elementary School Children. As a result, 303 Parents attended Inspection—just over 22 per cent.

CONTINUATION SCHOOLS.

131. Medical Inspection of Continuation Schools had not been commenced during 1920. Arrangements, however, are now being made for Medical Inspection to be carried out during the present year at the Continuation Schools at Rugby and Stratford-on-Avon.

EXAMINATION OF BURSARS, PUPIL TEACHERS, ETC.

132. During the year the following Special Examinations have been made :—

Bursars	...	...	...	47
Rural Pupil Teachers	...	...	...	18
Student Teachers	...	...	...	9

EXTRACTS FROM REPORTS OF THE ASSISTANT COUNTY MEDICAL OFFICERS.

133. DR. BRACEY, among other matters of interest recorded in the Northern part of the County, reports particularly on the Findings of Medical Inspection, Treatment of Defective Vision and Adenoids and the Hygiene of School Buildings as follows :—

134. “ Defective Vision is as usual far the most numerous defect, 235 (7·4%) compared with 5·3% last year. A small part of this increase may be due to increased facilities for treatment making it desirable to notify some of the slighter cases, but as only 12 cases of those I refracted myself were found not to require spectacles out of a total of 166 submitted to refraction, this part must be small indeed. I fear it is a real increase in defective vision, and although I cannot trace any direct connection between badly lighted Schools and defective vision, it is an additional reason for making schools more satisfactory in this respect.

135. “ Defective Hearing, 75 cases (2·46%), and Otitis Media, 16 cases (·52%), nearly all due to neglected Adenoids, constitute a class of defect serious out of proportion to their number; Adenoids may dry up leaving little or no nasal obstruction behind, but the damage they have done to the ears is often not only permanent but progressive long after the cause has ceased to be noticeable.

136. “ Tonsils 168, Adenoids 126, and the two together 103, total 397 (13%), show a great increase over the 5·29% of last year. Again part of this increase is due to the notification of a small number of slight cases which might not have been notified if seen a few years ago, but the more I see of these conditions the more convinced I am that operation is the only safe advice to give, save in very slight cases, for the reasons given above.

Provision of Spectacles.

137. “ For this purpose the North Division of Warwickshire is sub-divided into two parts; a smaller centreing on Tamworth, including Kettlebrook, Glascote, Amington, Shuttington, Dosthill, and Wilnecote, from which the children go to Dr. Francis Jones, in Tamworth, for Refraction, and the remainder of the Division in which I do the necessary

testing except for a small number of cases which go to the Birmingham Hospitals or are treated privately. In this area I have done 142 Refractions during 1920, which, with 24 done in the South Division, makes a total of 166, which may be divided as follows :—

Spectacles ordered and supplied	...	...	...	150
Spectacles not ordered after refraction	...	...	...	12
Existing spectacles repaired or correct	...	...	...	4
Total	...	...	...	166

138. “ The finding of a suitable room is one of the greatest difficulties which is met with in doing refractions about the County ; in most cases a cloak-room or other room on School Premises has been used, but in a few instances a room has been hired in a private house or other premises. As far as possible children are collected at a convenient central room so that time and energy may be economised by doing a number of cases on a single day at a single place. So far Refractions have been done at Austrey, Polesworth Central, Polesworth Nethersoles, Atherstone, Over Whitacre, Nether Whitacre, Sheldon, Coleshill, Minworth, Solihull, Shirley, Olton and Kingsbury in the North Division, and at Bidford, Alcester, Studley and Coughton in the South Division.

139. “ Some trouble has been experienced in finding a convenient light for this work. The self-luminous retinoscope used at first proved unsatisfactory. If used with a plain lamp it often gave an image of the filament, if with a frosted lamp the movement of the shadow was so slow that it was difficult to do accurate work. At present I am using an ordinary miniature electric lamp fed by the lighting battery of my car, and find this very satisfactory and convenient.

140. “ Atropin has invariably been used as the cycloplegic. The idea gained from Hospital Practice that it takes several days to act is found quite mistaken ; very rarely does it take more than an hour to act, so that if the atropin is put in the children's eyes as soon as one arrives at the School, they are generally ready for Refraction by the time the room is darkened, the lamp rigged up, and the facial measurements taken. This last is done by trying a number of differently shaped spectacle frames, one of which is nearly sure to fit. In the prescription the number of the frame and the interpupillary distance are given. In the rare cases which cannot be fitted with one of the standard frames, the number of the frame most nearly approaching the correct shape is given and the necessary deviation therefrom, e.g. ‘ Frame ; as No. 9 but with bridge 2mm. higher.’ By these means I have obtained well-fitting spectacles, although I prefer to see them on the child and make any little adjustments necessary myself.

Tonsils and Adenoids.

141. “ Operative treatment is provided in the North Division as follows :—At the Tamworth Hospital by local practitioners, whenever possible the patient's usual medical attendant ; at Atherstone by the local practitioners ; at the Infant Welfare Centre, Solihull, by local practitioners ; at Shirley by local practitioners ; and at St. Gerard's Hospital, Coleshill, by the Visiting Surgeon. The results of the operations have been most excellent, as far as I can remember only one case can be described as a failure, and this I gather was due to trouble with the anæsthetic. Where so much good work has been done by so many Medical men, it is almost invidious to particularise, but the work done at the splendidly equipped and well-staffed Hospital at Coleshill seems of special value.

142. “ A certain number of cases were also treated privately by Specialists or local practitioners.

Notes on School Premises.

143. " During 1920 a sanitary inspection has been made of all Elementary Schools in the North Division of Warwickshire and also of two Secondary Schools, but the following remarks apply to the former only.

144. " On the whole schools are kept fairly clean, and with a few exceptions the care-taking is satisfactory ; in these respects there has been decided improvement this year. Still, there is ample room for improvement in the general care of the Schools. Redecoration is very badly wanted in many of them, and sanitary defects are too prevalent and allowed to remain unnecessarily ; at more than one school pails of pail-closets were allowed to overflow or leak, causing a most filthy mess in the closets and their neighbourhood.

145. " Whatever may be done by way of palliative measures, the fact should be faced that School accommodation in this part of the County is insufficient in very many parts, and very extensive enlargements, reconstructions, and new constructions will be necessary in the next few years.

146. " The Housing Schemes will throw a great strain on School Accommodation. At Minworth for instance, the School was already over-crowded at the time of the routine inspection last March ; since then more than a dozen new houses have been built and occupied, besides several hutments, all sending their quota of children, and the extension is still going on. In the same district an extensive conversion of military hutments to domestic use is going on at Castle Bromwich, and we shall be faced with a grave shortage of School Accommodation within the next few months here also.

147. " Most serious of all is the probability of a large number of houses being built at Lea Marston in connection with the proposed Power Station there. If anything like the expected number be built, one of the largest schools in the County will be required to accommodate the children from them.

148. " With regard to details of existing Schools, the most unsatisfactory features are :—

" 1. Cloak-rooms unheated, badly ventilated, with pegs crowded and often in three or four tiers.

" 2. Fire-guards absent or not properly fixed.

" 3. Inefficient and wasteful heating apparatus.

" 4. Soap and towels often absent or towels very dirty.

149. " 5. Desks not graduated in accordance with the size of the children who have to sit in them ; this is likely to cause deformities and eye-strain. Now that children will be staying at school till 14, some larger desks should be provided in every School for them ; at present many of the larger children are working in most uncomfortably small desks.

150. " 6. Ventilation is often unnecessarily bad. Several satisfactory types of window openings are known, and it seems that it should be an easy matter to adopt one of them instead of going out of the way to use doubtful or unsatisfactory types.

151. "7. The provision of a covered play-shed in every play-ground, and of facilities for those children (and they are many in country schools) who cannot go home to dinner, to eat the food they bring with them in decency and comfort, is much to be desired."

152. DR. L. L. FYFE, in the Rugby and Eastern Division of the County, referring to the nutrition of the children, says :—

"The general nutrition of the children was very satisfactory, and I can scarcely recall a case in which mal-nutrition could be attributed to want of proper nourishment."

153. Referring to the results of operative treatment of Enlarged Tonsils and Adenoids, he remarks :—

"I have in every case examined the children after operation, and the results have been most satisfactory."

154. In connection with the work at the Bedworth Minor Ailments Clinic, he reports :—

"Scabies, Impetigo and Verminous Heads are very common in Bedworth. During the year 264 new cases of Impetigo were referred for treatment to the School Clinic at Bedworth. As such cases were, of necessity, excluded from school, 7,506 school attendances were thus lost. I am strongly of opinion that if more attention were paid to the personal cleanliness of the children, these diseases would largely be eliminated."

155. DR. W. H. SUTCLIFFE, who commenced work in the Central Division of the County in July, 1920, reporting, among other matters, on the Sanitary condition of School Premises, says :—

"With regard to the Sanitary condition of the Schools in my division, those which I have examined have generally been good. The Council Schools, more modern, generally have the better Sanitary Accommodation, though certain defects were almost general, such as the washing accommodation and Cloak Rooms already reported on."

156. DR. LLOYD ROBERTS, in the Southern Division, reporting on the condition of the children generally, says :—

"I have noticed that the children have shewn marked improvement since the war, in physique, clothing and cleanliness," and in connection with School Premises he records :—

157. "The school buildings are, on the whole, structurally, in a fairly satisfactory condition, although some of the smaller rural schools fall very short of the ideal."

CONCLUSION.

158. In reviewing the work of the School Medical Service during the year 1920, the chief points I have to emphasise are (1) the marked advance, on any previous year since the inception of Medical Inspection, in the amount of treatment effected. This is without doubt due to the zeal of the Education Committee in providing such excellent facilities for the treatment of Defective Vision, Enlarged Tonsils and Adenoids and Minor Ailments.

159. (2) The completeness of the arrangements during the year for "following up" by the County Health Visitors. As activities increase, necessitating the attendance of Health Visitors, such as at Minor Ailments Clinics, Eye Clinics, Dental Clinics, Infant Welfare Centres, Ante-Natal Clinics, Tuberculosis Dispensaries, etc., less and less of their time can be devoted to the following up of defects in the homes of the children, where so much valuable sanitary propaganda can be and is being daily effected, and unless the staff is increased commensurately with the additional work thrown upon them, the same results in future cannot possibly be expected. It is to be regretted, therefore, that at the time of going to print there seems little likelihood of the whole-time Health Visiting Staff even being maintained at the strength agreed upon by the Council in 1919. The staff was then increased largely on account of additional work being undertaken in connection with Medical Inspection, the Assistant Medical Staff being increased at that time from three to five Medical Officers for this same reason, and now that the "following up" must for the time being suffer, the Committee must be prepared for the future results of Medical Inspection to be affected accordingly.

160. (3) It is also with the greatest regret that I record the recent decision of the County Council to postpone for a year the development of the School Dental Service. In this provision Warwickshire is already much behind other Counties, School Dentistry being introduced for the first time in this County in the latter part of 1919 by the appointment then of one whole-time Dental Officer.

161. I am convinced that the inadequacy of this limited service is fully realised by the Council, and have no doubt that consideration will again be given to this all important matter when the County recovers somewhat from the financial and trade depression from which it is suffering so severely at the present time.

162. I take this opportunity of again expressing my indebtedness to the Director of Education for the assistance he has given me in the work of the School Medical Service, and to the Teachers and School Attendance Officers for their continued co-operation, to my own Staff, both Medical and Clerical, for their loyal support, and to your Committee for the consideration and interest you have at all times taken in this important work.

I have the honour to remain,

Your obedient Servant,

A. HAMILTON WOOD, M.D., D.P.H.,

School Medical Officer.

**Table 1. Number of Children Inspected, 1st January, 1920,
to 31st December, 1920.**

A.—ROUTINE MEDICAL INSPECTION.								
ENTRANTS.								Intermediate Group. 8
	Age.	3.	4.	5.	6.	Other Ages.	Total.	
Boys	...	43	321	732	631	360	2,087	1,555
Girls	...	31	289	716	673	362	2,071	1,433
		<hr/>	<hr/>	<hr/>	<hr/>	<hr/>	<hr/>	<hr/>
Totals	...	74	610	1,448	1,304	722	4,158	2,988
		<hr/>	<hr/>	<hr/>	<hr/>	<hr/>	<hr/>	<hr/>
LEAVERS.								B.
Age	12.	13.	14.	Other Ages.	Total.	Grand Total.	Special Inspections.	Re-Examinations (i.e. No. of Children Re-examined).
Boys	846	815	176	489	2,326	5,968	1,970	—
Girls	774	892	161	521	2,348	5,852	2,108	—
	<hr/>	<hr/>	<hr/>	<hr/>	<hr/>	<hr/>	<hr/>	<hr/>
Totals	1,620	1,707	337	1,010	4,674	11,820	4,078	2,011

C.—NUMBER OF INDIVIDUAL CHILDREN INSPECTED—17,909.

Table II. Return of Defects found in the Course of Medical Inspection in 1920.

Defect or Disease.	ROUTINE INSPECTIONS.		SPECIALS.	
	Number referred for Treatment.	Number requiring to be kept under observation but not referred for Treatment.	Number referred for Treatment.	Number requiring to be kept under observation, but not referred for Treatment.
(1)	(2)	(3)	(4)	(5)
MALNUTRITION	11	10	6	3
UNCLEANLINESS—Head	280	4	266	—
Body	19	2	16	—
SKIN—Ringworm, Head	12	—	115	—
Body	—	—	67	—
Scabies	37	1	135	1
Impetigo	38	—	773	—
Other Diseases (Non-Tubercular) ...	13	1	260	1
EYE—Blepharitis	19	5	37	—
Conjunctivitis	3	—	13	—
Keratitis	—	—	2	1
Corneal Ulcer	3	—	9	—
Corneal Opacities	1	—	—	—
Defective Vision	600	35	81	18
Squint	74	8	38	11
Other conditions	23	5	27	4
EAR—Defective Hearing	86	10	23	5
Otitis Media	49	8	52	4
Other Ear Diseases	76	5	34	—
NOSE AND THROAT—				
Enlarged Tonsils	612	240	120	19
Adenoids	160	8	24	6
Enlarged Tonsils and Adenoids ...	186	9	38	3
Other Conditions	74	20	53	8
ENLARGED CERVICAL GLANDS (Non-Tubercular)	14	35	19	6
DEFECTIVE SPEECH	—	—	2	2
TEETH (Dental Disease)	63	4	98	—
HEART AND CIRCULATION—				
Heart Disease—Organic	43	16	22	6
Ditto Functional	—	3	4	3
Anæmia	19	3	49	—
LUNGS—Bronchitis	15	3	18	—
Other Non-Tubercular Diseases ...	1	6	10	1
TUBERCULOSIS—				
Pulmonary—Definite	4	—	26	1
Ditto Suspected	26	8	32	1
Non-Pulmonary, Glands	2	—	11	—
Spine	—	—	—	—
Hip	1	—	2	1
Other Bones & Joints	1	—	3	—
Skin	—	—	6	—
Other Forms	1	—	2	1
NERVOUS SYSTEM—Epilepsy	—	—	4	—
Chorea	1	3	11	—
Other Conditions	—	1	7	—
DEFORMITIES—Rickets	1	—	—	—
Spinal Curvature	—	—	2	—
Other Forms	6	3	6	—
Other Defects and Diseases	199	63	329	28
Number of Individual Children having defects which required Treatment, or to be kept under observation	2484	479	2854	125

**Table III.—Numerical Returns of all Exceptional Children in the
Area in 1920.**

			Boys.	Girls.	Total.
Blind. (including partially blind).		Attending Public Elementary Schools Attending Certified Schools for the Blind Not at School	—	—	15
Deaf and Dumb. (including partially deaf).		Attending Public Elementary Schools Attending Certified Schools for the Deaf Not at School	—	—	18
Mentally Deficient.	Feeble Minded.	Attending Public Elementary Schools Attending Certified Schools for Mentally Defective Children ... Notified to the Local (Control) Authority during the year ... Not at School	—	—	19 2
	Imbeciles.	At School Not at School Notified to Local (Control) Authority	—	Nil —	— 5
		Idiots.			
	Epileptics.		Attending Public Elementary Schools Attending Certified Schools for Epileptics Not at School	—	Nil
Physically Defective.	Pulmonary Tuberculosis.	Attending Public Elementary Schools Attending Certified Schools for Physically Defective Children Not at School	—	Nil	—
	Other forms of Tuberculosis.	Attending Public Elementary Schools Attending Certified Schools for Physically Defective Children Not at School	—	Nil	—
	Cripples other than Tubercular.	Attending Public Elementary Schools Attending Certified Schools for Physically Defective Children Not at School	—	Nil	—
Dull or Backward.*		Retarded 2 years Retarded 3 years			

* Judged according to Standard.

Table IV.—Treatment of Defects of Children during 1920.
A.—Treatment of Minor Ailments.

Disease or Defect.	Number of Children.			
	Referred for Treatment	Treated.		
		Under Local Education Authority's Scheme.	Otherwise.	Total.
SKIN :—				
Ringworm—Head	112	112	—	—
Ringworm—Body	66	66	—	—
Scabies	131	131	—	—
Impetigo	765	765	—	—
Minor Injuries	—	—	—	—
OTHER SKIN DISEASES	259	259	—	—
EAR DISEASE	65	65	—	—
EYE DISEASE (external and other)	82	82	—	—
MISCELLANEOUS	297	297	—	—

B.—Treatment of Visual Defect.

Number of Children.									
Referred to refract'n	Submitted to Refraction.				For whom glasses pre- scribed.	For whom glasses were provided	Received Treat- ment other than by glasses.	Received other forms of treatm't	For whom no treat't was con- sidered necessary
	Under L.E.A. Scheme, Clinic or Hosp'l.	Private Pract- itioner or Hosp'l.	Other- wise.	Total.					
793	507	134	47	688	627	627	15	17	29

C.—Treatment of Nose and Throat.

Referred for Treatment.	NUMBER OF CHILDREN.			
	Received operative treatment.			Received other forms of treatment.
	Under Local Education Authority's Scheme, Clinic or Hospital.	By Private Practitioner or Hospital.	Total.	
1140	480	222	702	254

D.—Treatment of Dental Defects.

Number of children dealt with and particulars of time given and of operations undertaken.

	AGE GROUPS.										OTHER AGES.	TOTAL.
	5	6	7	8	9	10	11	12	13	14		
1. Inspected by Dentist ...	—	701	802	509	84	26	41	56	44	—	—	2263
2. Referred for Treatment ...	—	618	627	314	61	20	52	54	41	—	—	1787
3. Actually treated ...	—	408	394	206	32	19	22	25	20	—	—	1126
4. Re-treated ...	—	—	104	126	41	19	—	—	—	—	—	290
5. No. of half-days devoted to Inspection						71			
6. No. of half-days devoted to Treatment						304			
7. No. of attendances by children at Clinic						1896			
8. No. of Extractions—Permanent					141			
Temporary					2793			
9. No. of Fillings—Permanent				119			
Temporary				98			
10. Total No. of Fillings		217			
11. No. of administrations of General Anæsthetics included in (8)									37			
12. No. of other operations—Permanent				31	Scalings		
Temporary				127	Dressings.		

Table V.—Summary of Treatment of Defects as shewn in Table IV. (A., B., C., D. and F., but excluding E.)

Disease or Defect.	Number of Children.			
	Referred for Treatment.	Treated.		
		Under Local Education Authority's Scheme.	Otherwise.	Total.
Minor Ailments	1777	1777	—	1777
Visual Defects	793	507	181	688
Defects of Nose and Throat	1140	480	222	702
Dental Defects	1787	1126	—	1126
Other Defects	—	—	—	—
Total	5497	3890	403	4293

TABLE Va.
Cases at School Clinics—Referred for Treatment, 1920.

				Atherstone.	Bedworth.	Kenilworth.	Rugby.	Stratford-on-Avon.	Warwick.	Polesworth.	TOTALS—Clinics.	Medical Inspection.	GRAND TOTAL.
Malnutrition	...	...	...	—	2	—	2	—	—	—	4	2	6
Uncleanliness—Head	...	...	...	35	53	92	26	17	21	4	248	18	266
	Body	...	...	—	9	1	1	5	—	—	16	—	16
SKIN—Ringworm, Head	...	...	...	18	4	27	39	4	19	1	112	3	115
	Body	...	...	8	3	19	17	2	17	—	66	1	67
Scabies	...	...	...	13	21	3	49	9	31	5	131	4	135
Impetigo	...	...	...	69	262	52	200	53	121	8	765	8	773
Other Diseases (Non-Tubercular)	...	...	...	162	38	13	30	4	2	10	259	1	260
EYE—Blepharitis	...	...	...	3	7	4	5	4	10	1	34	3	37
Conjunctivitis	...	...	...	1	4	—	2	2	4	—	13	—	13
Keratitis	...	...	...	—	1	—	1	—	—	—	2	—	2
Corneal Ulcer	...	...	...	—	6	—	2	—	—	—	8	1	9
Corneal Opacities	...	...	...	—	—	—	—	—	—	—	—	—	—
Defective Vision	...	...	...	3	5	3	3	12	1	—	27	54	81
Squint	...	...	...	2	6	1	5	7	1	1	23	15	38
Other conditions	...	...	...	6	3	—	8	4	4	—	25	2	27
EAR—Defective Hearing	...	...	...	4	1	1	3	—	3	—	12	11	23
Otitis Media	...	...	...	—	16	—	9	5	2	—	32	20	52
Other Ear Diseases	...	...	...	11	—	1	14	—	7	—	33	1	34
NOSE AND THROAT—													
Enlarged Tonsils	...	...	...	1	4	1	5	6	1	—	18	102	120
Adenoids	...	...	...	1	1	3	3	2	2	—	12	12	24
Enlarged Tonsils and Adenoids	...	...	...	4	4	3	3	5	1	—	20	18	38
Other conditions	...	...	...	12	4	3	14	1	2	1	37	16	53
Enlarged Cervical Glands (Non-Tubercular)	...	...	...	3	4	2	4	1	3	—	17	2	19
Defective Speech	...	...	...	—	—	2	—	—	—	—	2	—	2
Teeth (Dental Disease)	...	...	...	2	2	—	82	3	—	—	89	9	98
HEART AND CIRCULATION—													
Heart Disease—Organic	...	...	...	—	—	1	12	—	1	—	14	8	22
Ditto Functional	...	...	...	—	—	—	3	1	—	—	4	—	4
Anæmia	...	...	...	—	2	9	32	1	—	—	44	5	49
LUNGS—													
Bronchitis—	...	...	...	—	8	2	4	2	—	1	17	1	18
Other Non-Tubercular Diseases	...	...	...	—	2	2	5	1	—	—	10	—	10
TUBERCULOSIS—													
Pulmonary—Definite	...	...	...	—	7	2	13	—	1	—	23	3	26
Ditto Suspected	...	...	...	—	9	—	13	—	2	—	24	8	32
Non-Pulmonary, Glands	...	...	...	5	—	5	1	—	—	—	11	—	11
Spine	...	...	...	—	—	—	—	—	—	—	—	—	—
Hip	...	...	...	1	—	—	1	—	—	—	2	—	2
Other Bones & Joints	...	...	...	—	2	—	—	—	1	—	3	—	3
Skin	...	...	...	—	—	1	5	—	—	—	6	—	6
Other Forms	...	...	...	—	—	1	1	—	—	—	2	—	2
NERVOUS SYSTEM—													
Epilepsy	...	...	...	1	—	—	1	1	—	—	3	1	4
Chorea	...	...	...	—	3	3	3	2	—	—	11	—	11
Other Conditions	...	...	...	—	3	—	3	—	—	—	6	1	7
DEFORMITIES—													
Rickets	...	...	...	—	—	—	—	—	—	—	—	—	—
Spinal Curvature	...	...	...	—	—	—	1	—	—	—	1	1	2
Other Forms	...	...	...	1	4	—	—	—	—	—	5	1	6
Other Defects and Diseases	...	...	...	13	54	21	83	26	99	1	297	32	329
No. of individual children	...	...	...	427	570	341	654	175	327	31	2525	329	2854

Table Vb.—Return of Defects.
Secondary Schools, 1920.

Defect or Disease.	ROUTINE INSPECTIONS.		SPECIALS.	
	Number referred for Treatment.	Number requiring to be kept under obser- vation but not re- ferred for Treatment.	Number referred for Treatment.	Number requiring to be kept under obser- vation, but not re- ferred for Treatment.
(1)	(2)	(3)	(4)	(5)
MALNUTRITION	2	1	—	—
UNCLEANLINESS—Head	8	—	—	—
Body	2	—	—	—
SKIN—Ringworm, Head	—	—	—	—
Body	—	—	—	—
Scabies	—	—	—	—
Impetigo	—	—	—	—
Other Diseases (Non-Tubercular) ...	4	—	—	—
EYE—Blepharitis	2	—	—	—
Conjunctivitis	—	—	—	—
Keratitis	—	—	—	—
Corneal Ulcer	—	—	—	—
Corneal Opacities	—	—	—	—
Defective Vision	66	6	2	—
Squint	—	—	—	—
Other conditions	—	—	—	—
EAR—Defective Hearing	3	—	—	—
Otitis Media	—	—	—	—
Other Ear Diseases	—	—	2	—
NOSE AND THROAT—				
Enlarged Tonsils	4	3	3	—
Adenoids	4	—	—	—
Enlarged Tonsils and Adenoids ...	15	—	—	—
Other Conditions	3	1	1	—
ENLARGED CERVICAL GLANDS (Non-Tuber- cular)	2	—	—	—
DEFECTIVE SPEECH	—	—	—	—
TEETH (Dental Disease)	93	—	1	—
HEART AND CIRCULATION—				
Heart Disease—Organic	6	3	—	—
Ditto Functional	—	1	—	—
Anæmia	2	—	—	—
LUNGS—Bronchitis	—	—	—	—
Other Non-Tubercular Diseases ...	1	—	—	—
TUBERCULOSIS—				
Pulmonary—Definite	—	—	—	—
Ditto Suspected	—	—	—	—
Non-Pulmonary, Glands	—	—	—	—
Spine	—	—	—	—
Hip	—	—	—	—
Other Bones & Joints	—	—	—	—
Skin	—	—	—	—
Other Forms	—	—	—	—
NERVOUS SYSTEM—Epilepsy	—	—	—	—
Chorea	—	—	—	—
Other Conditions	—	—	—	—
DEFORMITIES—Rickets	—	—	—	—
Spinal Curvature	15	—	—	—
Other Forms	3	—	—	—
Other Defects and Diseases	71	1	—	—
Number of Individual Children having defects which required Treatment, or to be kept under observation	263	16	7	—

Tabular Statement of work undertaken by the Health Visitors and School Nurses during 1920.

Total No. of Defective Cases Reported by the S.M.O.H.				Total No. otherwise Notified.	Total No. of Visits made.	Total No. of Cases Unvisited—i.e., Left School, Removed, Not Seen, Not Found.				Total No. of Cases Treated.			Total No. of Cases Untreated.	Total No. of Children Examined in School.	Total No. of Medical Inspections attended at the Schools.	No. of eases Reported to the N.S.P.C.C.	No. of Health Talks given.	Attendances at School Clinics.	General Remarks.																							
																													Cases first reported, 1920.	Cases left over from previous years.												
1920				4210	600	7076	9643	483	10933				953	33677 (This number does not include any children seen at School Clinics).	760	39	358	404	No Teeth are included in any of these Totals.																							
Sub-Divisions.				No. of Cases.	Vision.				Adenoids and Tonsils.			Deafness and Otorrhœa.		Anæmia, Debility.		Heart Disease.		Incipient Phthisis.		Spinal, etc., Defects.		Verminous and Ulcerated H'ds.		Heads infected with Nits.		Scabies.		Impetigo.		Ringworm.			Defective Teeth.		Neglected Children.		Other Diseases.					
					Spec- ta- cles ob- tained.	Medical advice ob- tained.	Other- wise Trea- ted.	Not Trea- ted.	Medical advice ob- tained.	No. of opera- tions.	No advice ob- tained.	Medi- cally Trea- ted.	Not Trea- ted.	Medi- cally Trea- ted.	Not Trea- ted.	Medi- cally Trea- ted.	Not Trea- ted.	Medi- cally Trea- ted.	Not Trea- ted.	Trea- ted.	Not Trea- ted.	Trea- ted.	Not Trea- ted.	Trea- ted.	Not Trea- ted.	Trea- ted.	Not Trea- ted.	Trea- ted.	Not Trea- ted.	Medical advice ob- tained.	X Rays.	Home Treat- ment.	No Treat- ment.	Trea- ted.	Not Trea- ted.	Im- proved.	Not Im- proved.	Trea- ted.	Not Trea- ted.			
I.	Miss Clappen	}	483	16	36	3	2	24	22	37	6	18	9	2	6	—	9	—	5	—	31	—	115	—	32	—	65	—	14	7	—	—	4	7	61	2	6	—	
II.	Miss Watterson		493	10	11	—	8	43	39	2	6	—	2	—	1	—	14	—	1	—	129	—	231	—	10	—	16	—	4	2	—	—	—	—	—	—	15	—	
III.	Miss Stevenson	648	95	110	5	9	144	127	27	22	6	4	—	2	—	17	—	—	—	24	—	61	—	45	—	83	—	22	8	16	1	4	6	3	—	37	10		
IV.	Miss Chorlton	335	15	19	2	8	58	53	2	8	1	—	—	4	1	5	—	5	—	13	—	78	—	26	—	36	—	7	—	14	—	—	—	7	—	38	3		
V.	Miss Pakes	863	82	68	1	15	58	45	53	7	3	4	1	4	1	21	—	3	1	34	10	216	63	35	—	166	—	31	17	12	—	9	10	—	—	35	21		
VI.	Miss Baker	907	29	40	—	15	77	58	34	1	—	17	—	6	—	12	—	1	—	24	—	282	—	25	—	84	—	55	11	6	—	7	3	35	—	193	—		
VII.	Miss Jeffrey	1148	82	82	34	26	76	48	17	10	1	33	—	24	—	42	—	3	—	151	—	186	—	44	—	170	—	29	9	17	—	100	—	39	—	158	6		
VIII.	Miss Hughes	338	15	27	—	5	61	41	51	4	—	1	—	4	—	1	—	—	—	7	—	28	—	20	—	67	—	6	—	—	—	—	—	2	—	49	5		
IX.	Miss Hunter	417	42	57	—	8	56	36	36	8	—	2	—	3	—	5	—	—	—	46	—	74	—	11	—	37	—	7	1	7	—	3	—	12	5	36	7		
X.	Miss Wheatley	769	29	31	—	8	65	33	11	5	—	5	—	2	—	3	—	1	—	111	—	366	—	23	—	53	—	9	—	12	—	102	—	18	—	33	13		
XI.	Miss Butler	674	61	64	1	6	32	32	11	8	—	1	—	5	—	4	—	1	—	56	—	200	—	23	—	172	—	10	5	6	—	—	20	25	3	46	—		
XII.	Miss Hodges	1490	49	67	1	19	22	18	33	3	2	12	—	6	—	14	—	—	—	404	—	525	2	29	—	246	—	19	1	—	—	—	—	22	2	61	1		
XIII.	Mrs. Perren	342	23	25	—	3	35	29	—	2	—	—	—	2	—	2	—	—	—	30	—	114	20	7	—	60	—	8	2	—	—	4	2	2	—	32	—		
XIV.	Miss Eagleston	917	23	66	—	20	26	9	34	2	—	11	—	5	—	11	—	2	—	81	—	53	—	108	—	292	—	57	5	—	—	11	—	6	—	128	15		
XV.	Miss Tustin	896	13	15	—	16	32	27	61	8	—	4	13	3	—	6	—	2	—	82	—	439	—	18	—	64	—	40	5	5	—	—	23	23	8	13	44		
XVI.	Miss Sampson	997	51	60	—	21	136	75	21	17	13	8	—	2	—	7	—	—	—	123	—	57	—	39	—	116	—	42	2	42	—	—	—	3	1	280	9		
XVII.	Miss Bartlam	169	6	7	—	1	11	10	17	2	1	—	—	1	—	—	—	—	—	25	—	40	—	25	—	14	—	5	3	1	—	2	—	7	—	12	—		
Totals				11886	641	785	47	190	956	702	447	119	45	113	16	80	2	173	—	24	1	1371	10	3065	85	520	—	1741	—	365	78	138	1	246	71	265	21	1172	134
Percentages for the year 1920				...	...	...	81·4		68·1		72·6			87·6		97·6		100		96		99·2		97·3		100		100			99·8		77·6		92·7		89·7			
Percentages for the year 1919				...	...	...	72·9		52·8		78·3			88·2		88·7		97·5		86·6		97·7		97·6		99·1		99·4			99·1		35·7		86·2		80·7			

The totals under Vision—Spectacles obtained—641, and under Adenoids and Tonsils—Number of Operations—702, are not included in calculating the percentages under these two headings. The figures 641 being included in 785, medical advice obtained ; and 702 in 956, medical advice obtained.

Total number of cases notified excluding heads 7355
" " " treated " " 6497
Percentage 88·3
Total number of cases notified 11886
" " " treated 10933
Percentage 91·1

MILDRED S. LOWE,
Superintendent.

V

Work

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